

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	GP		8.21.01
O.I.P.E. CLASSIFIER		43	9/8/01
FORMALITY REVIEW	B2	TC3-823	10-01-01
RESPONSE FORMALITY REVIEW	GP	1091	3/20/02

INDEX OF CLAIMS

✓ _____ Rejected
 o _____ Allowed
 - (Through numerals) _____ Canceled
 + _____ Restricted
 N _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

8-10-01
 8-28
 8-28/02